## PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number Q90175

	UN	IDER 37 CFR 1.136(a)						
FY 2009				Confirmation Number 4642				
(Fees p	oursuant to ti	he Consolidated Appropriations Act, 2005 (H						
Applicati	ion Numbe			iling Date	g Date March 10, 2006			
For POLYMERIZABLE DICHROIC AZO DYES			Examiner Name   Shean Chiu WU		u WU			
Art Unit   1722  This is a request under the provisions of 37 CFR 1.136(a) to extend								
		er the provisions of 37 CFR 1.136(a) to ex sion and fee are as follows (check time pe					appround:	
ine requé	saleu extens	Son and too are as follows (officer time be		Fee Small Entity Fee				
Ø	One	e month (37 CFR 1.17(a)(1))	;	\$130.00		\$65.00	\$130.00	
		o month (37 CFR 1.17(a)(2))	:	\$490.00	.00 \$245.00			
		Three month (37 CFR 1.17(a)(3))		\$1110.00	\$555.00			
	Fou	r month (37 CFR 1.17(a)(4))	\$	1730.00	\$865.00			
	Five	e month (37 CFR 1.17(a)(5))	\$	2350.00	\$	31175.00		
□ Pi	revious Pa	ayment Amount	Date Subn	nitted				
□ A	Applicant claims small entity status. See 37 CFR 1.27							
□ A	☐ A check in the amount of the fee is enclosed.							
☑ P	Payment by credit card.							
	The Director has already been authorized to charge fees in this application to a Deposit Account.							
_ T	he Directo	or is hereby authorized to charge an overpayment, to Deposit Account Nu	y fees, <b>except f</b>	for the Issu	ue Fe	e and the P	ublication Fee, or	
I am the applicant/inventor								
		assignee of record of the entire into Statement under 37 CFR 3.73(b) is	erest. See 37 ( s enclosed (For	CFR 3.71. m PTO/SB/	/96).			
	☑	attorney or agent of record. Regist	ration Number	33,725				
		attorney or agent under 37 CFR 1. Registration number if acting under	34. r 37 CFR 1 34					
		rregion and intriber if acting unde	washington office 23373 customer number					
	for m				November 22, 2010			
		Signature				Date		
	Bruce E. Kramer				(202) 293-7060 Telephone Number			
Note: \$	Signatures	Typed or printed name s of all the inventors or assignees of	record of the e	ntire interes	st or t			
		orms if more than one signature is r	equileu, see be			<del> </del>		
☑   1	Total of	1 form is submitted.						